



GOVERNOR'S OFFICE FOR CHILDREN AND FAMILIES

FAMILY VIOLENCE DIVISION

DOMESTIC VIOLENCE SHELTER SITE VISIT REPORT FY13

NAME OF AGENCY

DV Site Visit Report

Organization:		Date of Visit:	Bed Space:
Address:			
Phone:			
Email:			
Counties served:			
Organization Representative(s):			
GOCF Representative(s):			
Tool Definitions:			
I = Interviews O = Observation D = Documentation		M = Met PM = Partially Met DN= Did Not Meet U = Unsatisfactory N/A= Not Applicable NR=New requirement	
Strengths:			
1.			
2.			
3.			
4.			
Plan for Improvement:		Timeframe for Completion	Confirmation of Completion
1.			
2.			
3.			

4.		
5.		
6.		
Recommendations:		
1.		

SHELTER FACILITY REVIEW

Area of Review	Type of Review	I, O, D	M, PM, DM, U, N/A
FACILITY MAINTENANCE			
Agency maintains a landscape free from hazards, nuisances, and litter	Shelter tour - Exterior		
Sidewalks, fire escape routes and entrances are free of any hazards	Shelter tour - Exterior		
Play ground area is free from hazards, nuisances, and litter	Shelter tour - Exterior		
Agency has a designated area outside of the building for smoking, away from entrances and play areas	Shelter tour - Exterior		
Exterior storage areas are free from hazards, nuisances, and litter	Shelter tour - Exterior		
Walls and woodwork are maintained and in clean condition	Shelter tour		
Furnishings are clean and in good repair	Shelter tour		
Agency maintains and monitors private water system according to state and local standards and/or regulations (well water only)	Shelter tour, certification review		
Facility is clean and employs proper sanitation measures to prevent the spread of infection/disease	Shelter tour		
Agency maintains provision for regular garbage disposal	Shelter tour, disposal contract review		
Agencies provides for regularly scheduled interior/exterior pest control	Shelter tour, pest control contract/invoice		
Agency has shelter upkeep monitoring tool to ensure proper inspection	Review tool		
Agency has a schedule/process/plan for regular cleaning and timely inspections	Review tool, administrative procedure manuals, resident responsibilities		
EMERGENCY PREPAREDNESS			
Visible exit and emergency lights	Shelter tour, review by State Fire Marshall or local representative		
Fire drills conducted quarterly or as prescribed per Fire Marshall, drill logs required			
Visible smoke detectors			
Fire extinguishers in visible location(s) in accordance with Fire Marshall regulations			
Carbon Monoxide Detectors - one detector per floor (for agencies with gas appliances only)			
Agency displays floor plans for emergency evacuation in each room			
Agency has accessible first aid kits			
ACCESSIBILITY			
General areas inside and outside accommodate residents with impaired mobility	Shelter tour		

At least one bedroom and one bathroom must accommodate residents with impaired mobility	Shelter tour		
RESIDENTIAL AND ENVIRONMENTAL SAFETY			
All entrances and exits including windows and doors are securable	Shelter tour		
The agency has a monitored security system at the shelter along with functioning locks on all exterior doors, windows, and other access points to ensure safety of shelter residents, visitors, staff, and volunteers.	Shelter tour, security contract, system test/demo		
All electrical outlets not in use have outlet coverings	Shelter tour		
All blind cords are secured and out of reach of children	Shelter tour		
All areas are free of any hazards which could cause an accidental injury	Shelter tour		
Hazardous materials are securely stored and out of the reach of children	Shelter tour		
Electrical switches, devices and fixtures are maintained	Shelter tour		
All areas have adequate lighting indoors and outdoors	Shelter tour		
All areas have adequate heat and ventilation/air conditioning	Shelter tour		
All vent covers and ceiling fans are free of dirt and mold	Shelter tour		
Handrails are securely fastened (interior, exterior, bathrooms)	Shelter tour		
Child gates are installed and maintained for the safety of children when appropriate	Shelter tour		
Indoor and outdoor toys are clean and in good condition	Shelter tour		
Secure play space for children	Shelter tour		
Playground equipment at shelter is installed and maintained in a safe manner	Shelter tour		
Shelter will have policies and procedures that outline protocols for health and safety: 1. Fire 2. Natural disaster 3. Bomb threat 4. Intruder 5. Substances (illegal drugs or alcohol) 6. Accidental injuries 7. Medical concerns 8. Safe sleeping for infants 9. Other incidents (possession of weapons, destruction of property, etc)	Shelter tour, administrative procedure manuals, resident handbook		
Residents have access to basic first-aid kit, emergency medical supplies, and information regarding emergency and medical procedures, including universal precautions for infectious disease.	Shelter tour, resident handbook, staff and client interviews		
<u>Comments/Observations:</u>			

RESIDENTIAL LIVING			
Agency provides towels, washcloths, soap and access to other supplies for personal hygiene	Shelter tour, resident handbook, client interviews, Alice		
Residents have access to clothes closet, donations, thrift store for reasonable items at no cost, or items for residential setup when leaving shelter	Shelter tour, resident handbook, client interviews, Alice		
Cleaning supplies are available to residents	Shelter tour		
Agency provides all shelter residents with a handbook of shelter services, contacts and guidelines, rights and responsibilities for residential living	Resident handbook		
Safe cribs are provided for each infant as prescribed by U.S. Consumer Product Safety Commission (Office of Compliance, requirements for full size baby cribs and http://law.justia.com/cfr/title16/16-2.0.1.3.59.html for non-full size baby cribs)	Shelter tour, review of cribs		
Agency has signed acknowledgement by resident on proper prevention of Sudden Infant Death Syndrome (for information visit HealthyChildren.org, Reduce the Risk of SIDS)	Resident handbook/client files		
Each resident has access to proper storage	Shelter tour		
Resident bedroom doors open and close properly	Shelter tour		
Bedrooms have at least one window opening to the outside	Shelter tour		
Agency adheres to 8:1 ratio of residents to bathrooms	Shelter tour		
Functional toilets, sinks, and bathtubs or showers are provided	Shelter tour		
Bathroom(s) without windows have forced ventilation to the outside	Shelter tour		
Agency provides each resident with mattress cover to prevent transmission of infections/diseases	Resident handbook		
Agency ensures each bedroom is properly cleaned and sanitized before next room assignment	Shelter tour		
Agency posts, in a common space, information to report a critical incident.	Shelter tour		
FOOD STORAGE AND PREPARATION			
Cooking appliances and metal hoods are clean and maintained	Shelter tour		
An ample supply of cookware, utensils and dishes are made available for resident use	Shelter tour		
Cookware, utensils and dishes are clean and in satisfactory condition	Shelter tour		
Residents have daily access to fruit and vegetables	Shelter tour		
Pantry, refrigerators and freezers are adequately stocked with nutritional foods	Shelter tour		
Emergency food is available on 24 hour basis	Shelter tour		
Refrigeration at 40 degrees Fahrenheit or less and freezer at 0 degrees Fahrenheit	Shelter tour		
All food items stored in tightly sealed containers, once opened	Shelter tour		
<u>Observations/Comments:</u>			

AGENCY GOVERNANCE AND ADMINISTRATION

Area of Review	Type of Review	I, O, D	M, PM, DM, U, N/A
SECTION ONE: GOVERNANCE			
Standard 1: The agency functions in agreement with its stated purpose and in accordance to its bylaws.	Review bylaws		
Standard 1: The agency has documentation of its authority to operate under State law (Secretary of State annual filing and 501(c) 3).	Review bylaws and Articles of Incorporation		
Standard 2: The agency has a designated governing board.	Review bylaws, board membership and composition		
Standard 2: The agency documents the addresses, terms of membership, officers, and officers' terms of the governing body in accordance with O.C.G.A. §19-13-22.	Review board membership and composition		
Standard 2: The agency's board maintains written minutes of formal meetings. By-laws specify frequency of meetings and quorum requirements.	Review bylaws and meeting minutes		
Standard 2: Board members will receive an orientation and annual training that furthers their understanding of family violence.	Training logs, curricula, attendance logs, etc.		
Standard 3: The governing board establishes policies for efficient and effective operation of the organization.	Review bylaws and meeting minutes		
Standard 3: The board designates a person to act as program or executive director and delegates authority to manage the program, staff, and volunteers. The board conducts an annual performance evaluation of the director.	Review bylaws, meeting minutes, performance evaluation		
Standard 3: The board and program/executive director has a strategic plan that identifies goals, objectives, service delivery, and facility management.	Review strategic plan, meeting minutes		
Standard 3: The agency has a succession plan for the program or executive director.	Review bylaws or documented succession plan		
SECTION TWO: SOCIAL CHANGE			
Standard 4: The agency identifies those systems and organizations throughout its services area that affect the prevention and intervention of family violence.	Staff interviews, employee manual		
Standard 4: The agency evaluates by formal or informal methods those systems and agencies	Staff interviews, employee		

to determine which are harmful or ineffective.	manual		
Standard 4: The agency works to create social change, including but not limited to, prioritizing the community systems, agencies and institutions that need to be impacted; changing harmful or ineffective practices; reinforcing helpful practices; intervening where there are no established practices or policies; and/or serving on a local coordinating council or task force.	Staff interviews, coordinating council or task force meeting minutes/agendas		
Standard 4: The agency conducts public education sessions targeted to those systems and organizations that effect family violence prevention and intervention.	Staff interviews, Alice		
SECTION THREE: CONFIDENTIALITY			
Standard 6: The agency holds confidential all communications, observations, and information made by, between, or about victims receiving services.	Organizational policy/procedures, Alice		
Standard 6: The agency safeguards information identifying program participants. Confidential information is in hardcopy or electronic format.	Organizational policy/procedures, Alice		
Standard 7: Employees and volunteers are prohibited from disclosing survivor information to outside sources except in very limited circumstances.	Organizational policy/procedures		
Standard 8: Agency staff and volunteers adhere to the mandated child abuse and neglect reporting law (GA Code 19-7-5 (c)(1)).	Organizational policy/procedures		
Standard 11: Employees and volunteers have a process for maintaining victim confidentiality during attempted enforcement of involuntary commitment orders.	Organizational policy/procedures		
Standard 12: The agency has a process for handling the confidentiality of records and belongings after the victim is deceased.	Organizational policy/procedures		
SECTION FOUR: PROGRAM ADMINISTRATION AND COMMUNITY RELATIONS			
Standard 13: The agency and program services are administered in accordance with applicable professional, ethical, and legal principles.	Organizational policy/procedure,		
Standard 13: Shelters rules are established to maintain safety of the residents	Organizational policy/procedure, resident handbook		
Standard 13: The agency maintains an internal structure for efficient and effective administration including an organizational chart.	Organizational policy/procedure, organizational chart		
Standard 13: Service statistics are maintained in the Alice database	Alice, staff interviews		
Standard 13: The agency develops and implements a grievance policy whereby clients may	Organizational		

formally challenge the availability, timeliness, or quality of program services.	policy/procedure, resident handbook		
Standard 13: The agency uses Cogent Systems, Georgia Applicant Processing Services to conduct a national background check on all direct service shelter and outreach staff every three years.	Personnel files		
Standard 13: The agency has a policy regarding arrests of employees and direct service volunteers.	Organizational policy/procedure, Personnel manual		
Standard 14: The agency conducts community relation activities to increase the public's understanding of service availability.	Organizational policy/procedure, Alice, staff interviews		
Standard 14: Public education materials are available in other languages for ethnic groups with a presence in the community and the geographic area served and for special needs populations.	Organizational policy/procedure, staff interviews, brochures/materials		
<u>Comments/Observations:</u>			

SECTION SIX: FINANCIAL MANAGEMENT AND FUND DEVELOPMENT			
Standard 16: The board regularly reviews and analyzes its financial position.	Board bylaws and meeting minutes		
Standard 16: The agency implements a fund development plan that secures sufficient funds to support operating and capital needs.	Staff interviews, Board meeting minutes, Agency strategic plan, Organizational Policies/procedures		
Standard 16: The agency regularly reviews salaries and adheres to minimum wage laws.	Board meeting minutes, Organizational Policies/procedures		
Standard 17: Financial management is conducted in accordance with applicable professional, ethical, and legal principles. Policies for financial management are comprehensive and practical.	Organizational Policies/procedures		
Standard 17: Generally accepted accounting procedures and practices are implemented as required by terms of the GOCF contract.	Organizational Policies/procedures, Financial review		
Standard 17: The agency contracts with designated and appropriately qualified personnel to implement policies and procedures for financial management.	Organizational Policies/procedures, Financial review		
Standard 17: The agency provides bonding or insurance of persons responsible for financial resources.	Organizational Policies/procedures, Financial review		

Comments/Observations:

PROGRAM ADMINISTRATION AND CORE SERVICES

Area of Review	Type of Review	I, O, D	M, PM, DM, U, N/A
SECTION SEVEN: STAFF AND VOLUNTEER MANAGEMENT			
STAFF MANAGEMENT			
Standard 18: A comprehensive manual containing all personnel policies is maintained, kept current, and made available to all staff. The personnel policies provide for job classification, leave, and benefits. The agency keeps current written qualifications and comprehensive job descriptions for all positions.	Organizational policies/procedures, Personnel manual		
Standard 18: A written employee grievance policy is provided.	Organizational policies/procedures, Personnel manual, Personnel files		
Standard 19: The agency follows acceptable practices for recruiting, hiring, and assigning staff. Individual responsible for hiring staff is clearly defined. The agency implements hiring practices along with procedures for posting job positions, interviewing, and background checks.	Staff interviews, Organizational policies/procedures, Personnel manual		
Standard 19: The agency conducts comprehensive performance evaluations to measure the efficiency and effectiveness of staff administration.	Organizational policies/procedures, Personnel manual, Personnel files, Staff interviews		
Standard 19: The agency follows acceptable practices for terminating employees. Individual responsible for terminating employees is clearly defined.	Organizational policies/procedures, Personnel manual		
Standard 19: The agency maintains a comprehensive confidential personnel record for each staff member.	Personnel files		
Standard 21: As a minimum, 34 hours of job related family violence training is required for direct service staff during first year of employment, to include universal health precautions and CPR.	Organizational policies/procedures, Personnel manual, Personnel files		
Standard 21: All direct service staff will have a minimum of 15 hours of training for full-time	Organizational		

staff and 10 hours of training for part-time staff annually.	policies/procedures, Personnel manual, Personnel files		
Standard 22: The agency has supervision of full-time and part-time employees that ensures acceptable job performance.	Organizational policies/procedures, Personnel manual, Personnel files		
VOLUNTEER MANAGEMENT			
Standard 23: The agency maintains comprehensive and current job descriptions for volunteer positions.	Organizational policies/procedures, Volunteer manual, Volunteer files		
Standard 23: The agency follows acceptable practices in recruiting, screening, and assigning volunteers.	Organizational policies/procedures		
Standard 23: The agency uses Cogent Systems, Georgia Applicant Processing Services to conduct a national background checks on all ongoing direct service volunteers every three years.	Organizational policies/procedures, Volunteer files		
Standard 23: The agency keeps current and makes available a manual for direct service volunteers to include job descriptions as well as policies and procedures of the organization.	Volunteer manual		
Standard 23: The agency maintains a comprehensive, confidential personnel record system for each volunteer that includes, but is not limited to, a signed confidentiality statement and a record of trainings completed by each volunteer.	Volunteer files		
Standard 23: Direct service volunteers who work unsupervised with victims and their dependants must have completed a minimum of 20 hours of initial job specific family violence training.	Organizational policies/procedures, Volunteer files		
<u>Comments/Observations:</u>			
SECTION EIGHT: ELIGIBILITY			
Standard 24, 25: The agency accepts persons who are eligible for services based on state and federal definitions. The agency provides services regardless of race, religion, color, national origin, gender, age, mental or physical disability, sexual orientation, citizenship, immigration status, marital status or language spoken.	Organizational policies/ procedures, staff interviews		
Standard 24: The agency imposes no income eligibility standards on individuals seeking assistance.	Organizational policies/procedures		

<p>Standard 24: Upon initial contact with victims, program staff assess for the following:</p> <ol style="list-style-type: none"> 1. Eligibility for support and intervention services 2. Immediate safety 3. Batterer's potential for danger 4. Assure that the person requesting services is the survivor, not the perpetrator 5. Special needs 6. Other appropriate services 	Crisis call logs, Alice, Organizational policies/procedures		
Standard 26: The agency assists persons with special needs, mental or physical.	Organizational policies/procedures, staff interviews		
Standard 27: Eligibility criteria, and the extent to which the criteria affect the long-term or future eligibility for services, must be evaluated and documented on a case-by-case basis.	Organizational policies/procedures, staff interviews, Alice		
Standard 27: In the event the agency cannot admit new victims to a shelter due to capacity or other circumstances, every effort is made to secure and facilitate admission to safe alternate accommodations.	Organizational policies/procedures, staff interviews		
<p>Standard 27: If, after admission to a shelter, a victim is determined ineligible for services, program staff:</p> <ol style="list-style-type: none"> 1. Refers the victim to appropriate services elsewhere 2. Assists the victim with accessing transportation, if possible, to receive the services. 	Organizational policies/procedures, staff interviews		
SECTION NINE: CORE SERVICES			
CRISIS LINE			
Standard 28: The agency operates a 24-hour-a-day, seven day a week crisis line answered by qualified trained staff or volunteers.	Organization policies/procedures, Crisis call logs, staff interviews		
<p>Standard 28: When holding or transferring calls:</p> <ol style="list-style-type: none"> 1. Staff completes initial assessment as to immediate danger before putting caller on hold; 2. Staff checks back with callers on hold within a reasonable amount of time; 3. Staff prioritizes calls through safety and danger assessment. 	Crisis call logs, Alice, staff interviews		
<p>Standard 28: Crisis calls include, but are not limited to the following:</p> <ol style="list-style-type: none"> 1. Crisis intervention/emotional support 2. Assessment of the caller's safety and needs 3. Emergency protocols (calling 911, batterer is present) 4. Danger assessment 5. Dynamics of family violence 	Organization policies/procedures, crisis call logs, Alice		

6. Information, referrals, and linkages to additional community resources			
7. Appropriate documentation of call (call logs/Alice)			
8. Safety planning			
Standard 28: The agency has a minimum of two telephone lines, one of which is the designated crisis line.	Facility review, staff interviews		
Standard 28: The agency has a protocol that defines procedures for using a backup system in an emergency.	Organization policies/procedures		
Standard 28: Administrative and outreach phones are answered after hours, weekends and on holidays by devices that clearly direct callers to the crisis line.	Facility review, Organization policies/procedures		
SAFETY PLANNING			
Standard 29: The agency provides 24-hour staff to assist victims of family violence with determining levels of danger and to assist them in developing a personalized plan for safety.	Organization policies/procedures, staff interviews		
Standard 29: The agency maintains a protocol for safe travel of victims. Protocols contain a provision for victim travel to the program for intake and access to services.	Organization policies/procedures, Client handbook		
Standard 29: Safety planning includes a danger assessment to determine the victim's immediate level of danger.	Organization policies/procedures, Client handbook, Alice, staff interviews		
VICTIM SAFETY, PRECAUTION AND RESPECT			
Standard 30: The agency works collaboratively with other family violence organizations to meet the safety and security needs of victims.	Staff interviews, Alice		
Standard 30: The agency maintains a protocol for transporting victims from locations outside of the designated service area for entry into the shelter.	Organization policies/procedures, staff interviews		
Standard 30: The agency maintains a protocol for relocation between certified shelters	Organization policies/procedures, staff interviews		
Standard 30: The agency maintains a protocol for relocation to support systems that may include family, social service programs (i.e. substance abuse treatment facility), or out of state shelters.	Organization policies/procedures, staff interviews		

Standard 31: Program staff assesses any circumstances of violence, threatened violence, or other crime by a victim.	Organization policies/procedures, staff interviews, shelter logs		
Standard 32: The agency maintains policies and procedures that address the possession of firearms and/or other weapons while on the premises of the shelter or outreach offices.	Organization policies/procedures		
Standard 33: The agency has a written policy to assure serious incidents are properly reported and reconciled.	Organization policies/procedures		
Standard 33: The agency has a formal written incident reporting procedure.	Organization policies/procedures		
Standard 33: The agency notifies GOCF of critical incidents within 24 hours.	Organization policies/procedures, staff interviews		
Standard 33: The agency has a policy for disclosing any information received during an investigation of a critical incident.	Organization policies/procedures		
Standard 34: Participation in intervention services shall be voluntary.	Organization policies/procedures, staff and resident interviews		
Standard 34: The agency makes faith services available to victims and their dependants by providing access to transportation to such entity or by providing such services in the shelter in a private location.	Organization policies/procedures, resident and staff interviews		
INTAKE AND GUIDELINES			
Standard 35: The agency conducts an intake process that facilitates a victim's participation in the program.	Organizational policies/procedures, Alice, staff interviews		
Standard 35: Upon entrance to the shelter, the staff will provide a face-to-face welcome and assess immediate needs within 24 hours as well as provide orientation to shelter living.	Organizational policies/procedures, Alice, staff and resident interviews		
Standard 35: The agency conducts a comprehensive intake within 72 hours which includes the provision of the following: 1. List of program services 2. Confidentiality agreement 3. Safe infant sleeping agreement 4. Agreement for babysitting of other residents' children, signed by both parties 5. Transportation release form when providing transportation services 6. Guidelines and client rights (must include the following)	Organizational policies/procedures, Alice, resident handbook, staff and resident interviews		

<ul style="list-style-type: none"> a. Written policy regarding education plans for children including policy to address enrollment in school b. Written policy concerning non-violent discipline of children by staff and residents c. Written policy and procedure for reporting of child abuse <p>7. Safety planning and danger assessment</p> <p>8. Information regarding security issues, physical safety or acts of violence</p>			
<p>Standard 35: When possible, the agency will conduct an intake for outreach victims. Intake includes as a minimum of the following services:</p> <ul style="list-style-type: none"> 1. Safety planning and danger assessment 2. Description of the services available 3. Confidentiality agreement and client rights, if applicable 	Organizational policies/procedures, Alice, outreach client handbook, staff interviews		
<p>Standard 35: Every victim and their dependants are provided access to the following:</p> <ul style="list-style-type: none"> 1. Food, clothing, and hygiene items free of charge. Assistance accessing medical services. 2. A personal secured locker or secure location for personal belongings to include secure storage of medication. Personal belongings are accessible at all times to the victim through agency staff. 3. Basic advocacy and crisis intervention services are available 24 hours per day. 4. Every victim will have the option of practicing religious/spiritual beliefs so long as they do not interfere with the rights of other residents. 	Organizational policies/procedures, Alice, resident handbook, staff and resident interviews, facility review		
SERVICE PLANNING			
<p>Standard 36: In collaboration with the victim, the agency develops an individualized service plan for the purpose of assessing needs, appointing priorities, setting goals, implementing progress toward goals, and locating resources.</p>	Organizational policies/procedures, Alice, staff and resident interviews		
SHELTER SERVICES			
<p>Standard 37: The agency provides access, admittance, and residence in temporary shelter for victims of family violence and their dependants 24-hours per day, seven days per week. To ensure 24-hour admittance and support, night staff remains awake.</p>	Organizational policies/procedures, staff and resident interviews		
<p>Standard 37: The agency maintains written protocols outlining the location and methods by which shelter, advocacy/counseling, and other services are delivered to eligible adult and their dependants, including adult and minor males needing services.</p>	Organizational policies/procedures, resident handbook		
<p>Standard 37: Individual and group counseling, peer support groups, and referral to community-based services are provided to assist in the recovery from the effects of violence</p>	Organizational policies/procedures, resident handbook, Alice, staff and resident		

	interviews		
Standard 37: The agency provides services, training, technical assistance, and outreach to increase awareness of family violence.	Organizational policies/procedures, staff interviews		
Standard 37: The agency provides culturally and linguistically appropriate services.	Organizational policies/procedures, staff interviews, resident handbook, curricula		
Standard 37: The agency provides services for children, exposed to family violence and services for the non-abusing parent that support that parent's role as a caregiver; as appropriate may include the child and non-abusing parent working together.	Organizational policies/procedures, staff interviews, resident handbook, curricula		
Standard 37: The agency provides advocacy and service planning, information, and referral services (please refer to Standard 37, Practice 37.3, #7 a-f).	Organizational policies/procedures, staff interviews, resident handbook, Alice		
Standard 38: The agency has policies regarding length of stay, extensions, re-entry, and discharge of victims.	Organizational policies/procedures, resident handbook		
Standard 38: The following violations are included in the resident/client handbook that may result in involuntary discharge: <ol style="list-style-type: none"> 1. Use of violence or threats of violence including verbal abuse 2. Use of behavior that repeatedly disrupts the ability of other victims/children to receive safe and effective services 3. Possession of illegal substances or alcohol 4. Possession of firearms, stun-guns, knives or any other weapon that may threaten a life accidentally or intentionally 5. Incidence of theft 6. Violation of shelter rules and group living guidelines 7. Active suicidal or homicidal behaviors 8. Inability to function due to mental health issue or danger to self and others 9. Violating the confidentiality of another resident 	Resident handbook		
Standard 38: The agency provides sufficient notice to a victim when discharging voluntarily or involuntarily.	Organizational policies/procedures, resident handbook		
ADVOCATES AND ADVOCACY			
Standard 39: The agency utilizes advocates to provide direct intervention on behalf of and	Organizational		

with permission from victims.	policies/procedures, staff and volunteer files, Alice		
Standard 39: Advocacy contacts made on behalf of the victims to individuals or groups outside the program are not initiated without the victim's direct permission. Proof of permission is provided by program staff through a signed Release of Confidential Information Form. This practice is established for victims receiving services in shelter as well as through outreach services.	Organizational policies/procedures, resident handbook, confidentiality forms		
Standard 39: Victims in shelter and through outreach are informed of the process by which they may gain access, informally and by appointment, to advocates within the program.	Organizational policies/procedures, resident handbook, staff and resident interviews		
Standard 40: The agency provides legal advocacy to assist victims in receiving self-identified interventions and actions sought from the civil and/or criminal justice system.	Organizational policies/procedures, resident handbook,		
EMOTIONAL SUPPORT			
Standard 41: The agency provides group interactions facilitated by program or volunteer staff to address the emotional needs of victims.	Organizational policies/procedures, resident handbook, staff and resident interviews, curricula		
Standard 41: Group sessions are topic oriented, informational/educational, and conducted in a manner that is victim-centered, and facilitated by trained staff/volunteers.	Organizational policies/procedures, resident handbook, staff and resident interviews, curricula		
Standard 41: The agency offers shelter residents weekly support groups.	Organizational policies/procedures, resident handbook, staff and resident interviews, curricula, Alice		
CHILDRENS' SERVICES			
Standard 42: The agency provides age appropriate services for children.	Organizational policies/procedures, resident handbook, staff and resident interviews, curricula, Alice		
Standard 42: The agency conducts an intake process that is child friendly, age appropriate, and includes interactions with the non-offending parent. The following is included during child	Organizational policies/procedures, staff		

intakes: 1. Areas of concern the parent has for each child 2. Physical, emotional, and educational needs of the child 3. Health and medical needs 4. Documentation of suspected child abuse	and resident interviews, Alice		
Standard 42: The agency will provide a face-to-face intake interview that includes an advocate, to discuss available services, shelter guidelines for children, and discipline guidelines while in shelter.	Organizational policies/procedures, staff and resident interviews, Alice		
Standard 42: A record is opened in Alice for each child and service planning information is entered.	Organizational policies/procedures, staff and resident interviews, Alice		
Standard 42: Program staff/child advocate develops a safety plan for each child when age appropriate.	Organizational policies/procedures, staff and resident interviews, Alice		
Standard 42: The agency provides support group services and structured activities for children in the shelter.	Organizational policies/procedures, staff and resident interviews, Alice, curricula		
Standard 42: A signed consent form is kept on file to allow dependants to participate in sponsored outings.	Organizational policies/procedures, consent forms, resident handbook		
Standard 42: The agency makes parenting education available for the non-offending parent.	Organizational policies/procedures, staff and resident interviews, resident handbook, curricula		
Standard 42: Child advocate/program staff is available to meet with each parent at least once per week in an individual setting.	Staff and resident interviews, resident handbook,		
RESTRICTED SERVICES			
Standard 43: The agency does not provide couples counseling or mediation in any form.	Organizational policies/procedures, staff and resident interviews		
Standard 43: The agency does not provide family counseling or mediation that includes the	Organizational		

alleged batterer.	policies/procedures, staff and resident interviews		
DOCUMENTATION OF SERVICES			
Standard 45: The agency maintains documentation of services for each victim and their dependants.	Alice, resident/shelter logs		
Standard 45: Service documentation stated below for Alice system and/or paper files: 1. Signature/initials of advocate 2. Entries made timely after contact with victim 3. Only necessary facts are recorded 4. Documents do not contain any diagnosis or clinical assessment 5. Documents for one victim does not include names of other victims/residents for the purpose of service planning	Alice, resident/shelter logs		
Standard 45: Documentation for advocacy, support, and service planning contains at least: 1. Demographic data 2. Danger assessment 3. History of abuse 4. Notes that indicate safety planning occurred and was revised as needed 5. Description of abuser 6. Individualized service plan 7. Assessment of dependants if applicable 8. Notification of Exceptions to confidentiality, advising victims of advocate's duty to release confidential information in the following circumstances: a. Report child abuse b. Protect against danger to self or others c. Summon emergency services d. Maintenance of safety and health standards of shelter facilities 9. Informed Consent to Release Confidential Information form-if applicable 10. Exit interview with surveys	Alice, resident/shelter logs		
Standard 46: The agency attempts to provide an exit interview with each victim upon completion of service delivery or prior to departure from the program.	Alice, resident/shelter logs		
Standard 47: The organization has a written procedure for follow up with victims who have departed from the program.	Staff interviews, Alice, follow-up procedure documentation		

Comments/Observations:

ACKNOWLEDGEMENT OF SITE VISIT REPORT

1. Please review and return the Acknowledgement of Site Visit Report with the original signatures of the Executive Director and Board Chair.
2. A written response to the site visit report is due within two weeks of receipt. Response is to be submitted on agency letterhead and must include the signature of the Executive Director and Board Chair. Agency is required to describe how it will respond to each Plan for Improvement and adhere to dates of completion as prescribed by GOCF. It is requested that the agency also respond to Recommendations.
3. Upon completion of the Plan for Improvement a written response is required indicating how the agency addressed each Improvement Plan. Please provide supporting documentation as prescribed by GOCF. Response is to be submitted on agency letterhead and must include the signature of the Executive Director and Board Chair.
4. Upon GOCF review and approval, the agency will receive a final signed copy of the site visit report certifying completion of the improvement plan and a letter of Shelter Certification.

Initial Report Acknowledgement

Katie Jo Ballard	Date
Executive Director, Governor's Office for Children & Families	

Executive Director	Date
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Board Chair	Date
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Completion of Improvement Plan if Prescribed by GOCF

Katie Jo Ballard	Date
Executive Director, Governor's Office for Children & Families	

Executive Director	Date
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Board Chair	Date
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